

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ammar Campa for Congress

Full Name (Last, First, Middle Initial)

A. California Democratic Party

Mailing Address 1830 9th Street

City
SacramentoState
CAZip Code
95811Purpose of Disbursement
Federal Contribution

011

Candidate Name

California Democratic Party

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
12	14	2017

FEC Identification Number

C C00105668

Amount of Each Disbursement this Period

350.00

Transaction ID : EXPB1068

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Council on American Islamic Relations

Mailing Address 453 New Jersey Avenue, SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Civic Donation

012

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	25	2017

FEC Identification Number

C

Amount of Each Disbursement this Period

650.00

Transaction ID : EXPB735

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. San Diego County Democratic Party

Mailing Address 8340 Clairemont Mesa Blvd., Suite

City
San DiegoState
CAZip Code
92111Purpose of Disbursement
Federal Contribution

011

Candidate Name

San Diego County Democratic Party

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
11	17	2017

FEC Identification Number

C C00402826

Amount of Each Disbursement this Period

250.00

Transaction ID : EXPB894

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1250.00

TOTAL This Period (last page this line number only).....▶